

MAR 16 1991

CERTIFIED MAIL

RETURN RECEIPT REQUESTED

Article Number: P 564 228 028

Mr. Jim Jensen
Environmental Coordinator
Square D Company
P.O. Box 3069
Cedar Rapids, Iowa 52406-3069

Re: Square D Company
Cedar Rapids, Iowa
EPA ID No. IAD000819110

Dear Mr. Jensen:

This is in response to your letter of February 26, 1991, in which you requested an extension to the ninety (90) day storage limit for one bag of F006 listed hazardous waste sludge. You stated that due to scheduling problems, you were not able to ship the waste off-site before the 90 day storage limit expired on February 28. However, you expect this waste to be shipped on March 5, 1991.

A review of our files indicates that this is the third such request since August 1989. All of these requests were due to scheduling problems with the disposal facility. Therefore, we would suggest that Square D Company schedule off-site waste transportation and disposal more frequently, rather than waiting for the entire 90 days to expire before the waste is removed.

Please note that such extensions are given on a case-by-case basis where the circumstances for such storage are temporary, unforeseen and uncontrollable. Requests for these extensions must be received and granted by the Agency before the 90 day storage limitation has expired.

We are granting your extension request in this case. Future requests for storage extensions will be reviewed carefully, as have past requests, to see that they meet the conditions stated in Title 40 of the Code of Federal Regulations (C.F.R.) § 262.34(b). The F006 waste must be shipped off-site on or before March 30, 1991. Within thirty (30) days of shipment, you



R00352697

RCRA RECORDS CENTER

must submit a copy of the completed hazardous waste manifest and land disposal restriction notice to Ms. Elizabeth Koesterer, RCRA/IOWA, at the letterhead address. No further extensions may be granted for this container of F006 waste.

Should your facility exceed the ninety (90) day accumulation time and not be granted an extension to that timeframe, your facility would become subject to the requirements of 40 C.F.R. Parts 264, 265 and 270. Your facility could also be issued a formal enforcement action pursuant to Section 3008 of RCRA, that may include penalties of up to \$25,000 per day of non-compliance.

If you have any questions concerning this letter, please contact Ms. Koesterer at (913) 551-7058, or at the letterhead address.

Sincerely yours,

Michael J. Sanderson
Chief, RCRA Branch
Waste Management Division

cc: Pete Hamlin, IDNR

UNITED STATES POSTAL SERVICE

OFFICIAL BUSINESS

SENDER INSTRUCTIONS

Print your name, address and ZIP Code in the space below.

- Complete items 1, 2, 3, and 4 on the reverse.
- Attach to front of article if space permits, otherwise affix to back of article.
- Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE
USE, \$300

RETURN

TO



Print Sender's name, address, and ZIP Code in the space below.

U.S. EPA Region VII
RCRA Branch/IOWA Section
726 Minnesota Avenue
Kansas City, KS 66101

BK
MAR 18 1991

P 564 228 028

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Square D Co.	
Sent to	
Jim Jensen	
Street and No.	
P.O. aBo 3069	
P.O., State and ZIP Code	
Cedar Rapids, IA 52406-306	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	

U.S.G.P.O. 1989-234-555

1 3800, June 1985

<p>SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.</p> <p>Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.</p> <p>1. <input type="checkbox"/> Show to whom delivered, date, and addressee's address. (Extra charge) 2. <input type="checkbox"/> Restricted Delivery (Extra charge)</p>	
<p>3. Article Addressed to:</p> <p>Mr. Jim Jensen Environmental Coordinator Square D. Co. P.O. Box 3069 Cedar Rapids, IA 52406-3069</p>	<p>4. Article Number</p> <p>P 564 228 028</p> <p>Type of Service:</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise</p> <p>Always obtain signature of addressee or agent and DATE DELIVERED.</p>
<p>5. Signature — Addressee</p> <p>X</p>	<p>8. Addressee's Address (ONLY if requested and fee paid)</p> <p>MAR 6 1991</p> <p>IOWA SECTION</p>
<p>6. Signature — Agent</p> <p>X</p>	
<p>7. Date of Delivery</p> <p>MAR 21 1991</p>	

PS Form 3811, Apr. 1989

★ U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE, CERTIFIED MAIL FEE, AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES. (see front)

1. If you want this receipt postmarked, stick the gummed stub to the right of the return address leaving the receipt attached and present the article at a post office service window or hand it to your rural carrier. (no extra charge)

2. If you do not want this receipt postmarked, stick the gummed stub to the right of the return address of the article, date, detach and retain the receipt, and mail the article.

3. If you want a return receipt, write the certified mail number and your name and address on a return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix to back of article. Endorse front of article **RETURN RECEIPT REQUESTED** adjacent to the number.

4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse **RESTRICTED DELIVERY** on the front of the article.

5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in item 1 of Form 3811.

6. Save this receipt and present it if you make inquiry.

★ U.S.G.P.O. 1989-234-555